



WEEKLY CERTIFIED PAYROLL REPORTING FORM

NAME OF CONTRACTOR :Scaffold Resource LLC Subcontractor to Lend Lease - Old Post Office PAYROLL No. 24 FOR WEEK ENDING: 12/27/2014 SUBMITTED ON: January 02, 2015					CONTRACTOR'S LICENSE No. 3019247223 SPECIALTY LICENSE No.						ADDRESS: 9513 Lanham Severn Road , Lanham, Md 20706 PHONE: 301-924-7223 EMAIL: dford@scaffoldresource.com						PROJECT LOCATION/ CODE / NAME : Washington, DC / 46126400 / Trump Hotel							
					MOTOR CARRIER PERMIT No.					No.	AT TT		SURED CERTIFICATE No. RS' COMP. POLICY :				WAGE DECISION: DC 130002 7/05/2013							
IAME, ADDRESS, SSN, DRIVER'S ICENSE, ETHNICITY, GENDER	ME, ADDRESS, SSN, DRIVER'S WORK			HOURS WORKED EACH DAY						TOTAL HOURS		GROSS AMOUNT EARNED		DEDUCTION . C		ONTRIBUTION AND PAYMENTS				NET WGS PAID FOR WEEK	CHECK No.			
DLIVER, KEITH	п	C	OWER EQUIPMENT DERATORS / GROUP 3: Backhoes, cherrypickers, elevating		12/21/14	12/22/14	12/23/14	12/24/14	12/25/14	12/26/14	12/27/14	TOTAL HOURS THIS	BASE HOURLY RATE	THIS	ALL	Federal Tax	Social Security	Medicare	State Tax	Local Taxes	Other	Savings	Total	Check
b) (6)	EXEMPT	g	Backhoes, cherrypickers, elevating graders, hoists, power shovels, gradalls, front end loaders-3 1/2 Washington, DC		S	M 10.75	T 10.75	W 5.25	TH	F	S	PROJECT 26.75	OF PAY \$31.43	PROJECT	PROJECTS	103.67	98.11	1 0.00	47.40	/ SDI 46.05	0.00	0.00	Deduction \$295.23	No. 2312594
	I	0 V		s o		10.75	10.75	5.25				20.73	\$0.00 \$840.75	1,412.50	Vac/Dues	Trav. Subs.	Health & Welfare	Pension	Vacation Holiday	Training	All Other	Total Fringes Paid to 3rd	Net Pa Weel	
			WD: DC 130002 7/05/2013	D									\$0.00			0.00	0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$220.15	220.15	1,1
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			Volunta	ary Co	iiii ibutic	ons in Gi	oss ray.	NO					\$0.00	0.00	39.66	0.00	0.00	0.00	0.00	0.00	0.00	8.23	8.23	,
EIGMAN. LEWIS		L	.ABO0657-015 / LABORER:									TOTAL	BASE											
b) (6)	EXEMPT	S	skilled / Type: Building		12/21/14 S	12/22/14 M	12/23/14 T	12/24/14 W	12/25/14 TH	12/26/14 F	4 12/27/14 S	HOURS THIS PROJECT	HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Checl No.
	PT			c		IVI	<u> </u>	4.00	1111	1	3	4.00	\$30.00	_ I	850.00	0.00	55.08	0.00	0.00	0.00	0.00	0.00	\$55.08	231261
				3				4.00	1			1.00				Vac/Dues	Trav.	Health	Pension	Vacation	Training	All Other	Total Fringes	Net F
		0 V	Vashington, DC	О									\$0.00	\$120.00			Subs.	& Welfare		Holiday			Paid to 3rd	
, , ,		V	Washington, DC WD: DC 130002 7/05/2013	O D									\$0.00		Tatal Page	0.00	Subs. 0.00	& Welfare \$0.00	\$0.00	Holiday \$0.00	\$0.00	\$27.32	Paid to 3rd 27.32	Wee
		1	WD: DC 130002 7/05/2013 to Employee: NO	D		ation, Holons in Gr			Gross Pa	v: NO				\$120.00 Total in Lieu of Fringes	Total Base Rate + Fringes	0.00 Voluntary Pension	Subs.	& Welfare	\$0.00 Pension Rate	Holiday	\$0.00 Training Rate	\$27.32 All Other Rate	Paid to 3rd	Wee
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TOTAL STANDARD HOURS: 38.75 TOTAL 1.5 OT HOURS: 0.00 TOTAL 2.0 OT HOURS: 0.00 GRAND TOTAL HOURS: 38.75

Statement of Compliance

Date Friday, January 2, 2015

- I, Darlene Ford, Payroll Manager do hereby state:
- (1) That I pay or supervise the payment of the persons employed by SCAFFOLD RESOURCE LLC on the TRUMP HOTEL; that during the payroll period commencing on 12/21/2014 and ending on 12/27/2014 all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said SCAFFOLD RESOURCE LLC from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

All comments are in the notes on the submitted Certified Payroll Report.

- (2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.
- (3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.
- (4)That:
- (a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR PROGRAMS
- [X] in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit
- of such employees, except as noted in section 4(c) below.
- (b) WHERE FRINGE BENEFITS ARE PAID IN CASH
- [] Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.
- (c) EXCEPTIONS:

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME: **Darlene Ford**TITLE: **Payroll Manager**

Electronic Signature Code (b) (6

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

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Employee Name

Craft

Classification

Other Deduction Notes